

**UTILITY PATENT APPLICATION
TRANSMITTAL**

(under 37 CFR 1.53(b))

Docket No.	P06505US06/RFH
1 st Inventor	WALSH
Title	METHOD FOR VERIFICATION OF A PATIENT AND OF A MEDICAL TREATMENT TO BE DELIVERED TO THIS PATIENT

APPLICATION ELEMENTS

- ☒ Fee Transmittal (FEE CALCULATION below)
- ☒ Applicant claims **small entity status**
- ☒ Specification [total pages = 56]
- ☒ Drawings [total sheets = 13]
- ☒ Oath or Declaration [total sheets = 1]
- Newly executed (original or copy)
- ☒ Copy from prior appl. (for cont./div.)

ACCOMPANYING APPLICATION PARTS

- Application Data Sheet
- Assignment Papers (cover sheet + document(s))
- Information Disclosure Statement
- Preliminary Amendment
- Certified Copy of Priority Document
- ☒ Return Receipt Postcard
- ☒ Petition to Make Special

☒ **CONTINUING APPLICATION**-check box below-must claim benefit of parent via Pre. Am., Appl Data Sheet or in Spec.

This is a ☒ Continuation ☐ Divisional ☐ Continuation-in-Part
of: Prior Appl. No.: 10/166,167 Examiner: A. Sanders Art Unit: 2876

FOR CONTINUATION or DIVISIONAL APPLICATIONS ONLY: The entire disclosure of the prior appl., from which an oath or declaration is supplied above, is considered a part of the disclosure of the accompanying cont. or div. appl. and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted for the submitted appl. parts.

FEE CALCULATION and notations

	NOW	Basic Number	Present Extra	Rate	\$
<input checked="" type="checkbox"/> TOTAL CLAIMS	9	- 20	0	X \$ 18 =	
<input checked="" type="checkbox"/> INDEP. CLAIMS	1	- 3	0	X \$ 84 =	
MULTIPLE DEPENDENT CLAIM(S)				+ \$ 280 =	
<input checked="" type="checkbox"/>				BASIC FILING FEE	\$ 750 = 750
				TOTAL OF ABOVE CALCULATIONS	= 750
<input checked="" type="checkbox"/> Reduction by ½ for small entity status of applicant					- 375
				SUBTOTAL	= 375
<input checked="" type="checkbox"/> Fee for Petition to Make Special					130
				TOTAL OF ALL FEES	= 505.00

..... No check is enclosed, and no charge should be made to our account.

☒ A check in the amount of \$505.00 is enclosed. If no check or an insufficient check is enclosed and a fee is due in connection herewith, the Commissioner is authorized to charge any fee or additional fee due in connection herewith to Deposit Account No. 12-0555.

CORRESPONDENCE ADDRESS

☒ Customer Number: **00881**

Responsible Attorney: Ross F. Hunt, Jr.

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LARSON & TAYLOR, PLC • 1199 North Fairfax St. • Suite 900 • Alexandria, VA 22314

Signature of
Filing Attorney

Date: July 28, 2003

Filing Attorney: Ross F. Hunt, Jr.

Registration No.: 24,082

07/28/03

15915 U.S. PTO

03807 U.S. PTO

07/28/03